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PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-875

Application or Document Number
70-003776

CLAIMS AS FILED - PART I

(Column 1)		(Column 2)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.18(a))				395.00			790.00
TOTAL CLAIMS (37 CFR 1.18(c))	minus 20 =	-	x 25		OR	x 50	
INDEPENDENT CLAIMS (37 CFR 1.18(b))	minus 3 =	-	x 100		OR	x 200	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(d))			+ 180		OR	+ 360	
* If the difference in column 1 is less than zero, enter "0" in column 2.			TOTAL		OR	TOTAL	

CLAIMS AS AMENDED - PART II

(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	7	Minus 20	-	x 25		OR	x 50	
Independent (37 CFR 1.16(b))	2	Minus 3	-	x 100		OR	x 200	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ 180		OR	+ 360	
				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	7	Minus 20	-	x 25		OR	x 50	
Independent (37 CFR 1.16(b))	2	Minus 3	-	x 100		OR	x 200	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ 180		OR	+ 360	
				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))		Minus		x 25		OR	x 50	
Independent (37 CFR 1.16(b))		Minus		x 100		OR	x 200	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ 180		OR	+ 360	
				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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